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National Minority SA/HIV Prevention Initiative Cohort 7

Adult Questionnaire

Last Name	, First Name	, M.I.	
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TO BE COMPLETED BY THE LOCAL GRANT SITE DATA COLLECTOR

Participant ID #: _____

RESPONDENT OR PARTICIPANT: Before answering any of the questions, please make sure your name is correct. If incorrect, make the change in the box above. <u>Do not write your name on any other page in this questionnaire</u>. Thank you.

National Minority SA/HIV Prevention Initiative Cohort 7

Adult Questionnaire

Funding for data collection supported by the Center for Substance Abuse Prevention (CSAP) Substance Abuse and Mental Health Services Administration (SAMHSA) U.S. Department of Health and Human Services (HHS)

These questions are part of a data collection effort about how to prevent substance abuse and HIV infection. The questions are being asked of hundreds of other individuals throughout the United States. The data findings will be used to help prevention initiatives learn more about how to keep people from using drugs and getting infected with HIV.

Completing this questionnaire is voluntary. If you do not want to answer any of the questions, you do not have to. However, your answers are very important to us. Please answer the questions honestly—based on what you really do, think, and feel. Your answers will not be told to anyone in your family or community. Do not write your name anywhere on this questionnaire.

We would like you to work fairly quickly so that you can finish. Please work quietly by yourself. If you have any questions or don't understand something, let the data collector know.

We think you will find the questionnaire to be interesting and that you will like filling it out. Thank you very much for being an important part of this data collection effort!

Completing this questionnaire will take no more than an average of 50 minutes per person. These questions support performance reporting for the Government Performance Results Act, Performance Assessment Rating Tool, CSAP's National Outcome Measures, and the CSAP Minority AIDS Initiative. Send comments or questions regarding this burden estimate or any other aspect of this collection of information to SAMHSA/CSAP, 1 Choke Cherry Road, Room 5-1115, Rockville, MD 20857.

INSTRUCTIONS

- 1. Answer each question by marking one of the answer circles. Some questions allow you to mark more than one answer. If you don't find an answer that fits exactly, choose the one that comes closest.
- 2. Mark your answers carefully so we can tell which answer circle you chose. Do not mark between the circles.
- 3. It is very important that you answer each question truthfully. Your responses will not be helpful unless you tell the truth.

MARKING YOUR ANSWERS

Use a No. 2 black lead pencil.

EXAMPLES

- Do not use an ink or ballpoint pen.
- Make heavy dark marks that fill the circle completely.
- Erase cleanly any answer you wish to change.
- Make no stray marks on this questionnaire.

Correct Marks:

Incorrect Marks:

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Record Management Section: To be Completed by Designated Staff **Grant ID Interview Type (Select one)** $S \mid P$ O Baseline O Exit O Follow-up **Intervention Duration (Select one) Study Design Group (Select one)** O Single Session Intervention O Intervention O Comparison O Multiple Session Brief Intervention (less than 30 day duration) **Participant ID** O Multiple Session Long Intervention (30 days or longer duration) Intervention Name(s) (If the participant is **Date of Survey Administration** receiving services for more than one intervention, please list each intervention below) Month Day Year 2. 3. Section One: Facts About You First, we'd like to ask some basic questions about you. Your answers will not be used to identify you in any way. Instead, your answers will help us understand how different groups (like men or women, or people of similar ages) feel about substance abuse and HIV prevention. How would you describe yourself? (Gender) 1. 3. In what month were you born? Male January Mav September Female February June October Transgender O July November March Male to female April August December Female to male 4. On what day of the month were you born? 2. In what year were you born? (Enter all four digits of the year in the boxes below, and fill in corresponding O 22 0 1 O 12 circles) O 23 0 2 O 13 0 3 0 14 0 24 0 4 0 15 0 25 0 5 0 16 0 26 0 6 0 17 0 27 0 0 0 0 0 0 10 0 7 O₁₈ 0 28 10 10 10 0 29 2 0 20 20 0 8 0 19 3 0 3 🔾 3 0 0 9 O 20 \bigcirc 30 40 40 40 0 10 O 21 0 31 5 0 5 0 5 0 0 11 6 O 60 6 O 7 0 70 7 0 5. Are you Hispanic or Latino? 8 0 80 8 0 90 90 9 0 O Yes O No

6.	What is your race? (Select one or more)	11.	If less than 12 years of education, do you have a GED (General Equivalency Diploma)?
	 White Black or African American American Indian Native Hawaiian or Other Pacific Islander 		O Yes O No
	AsianAlaska NativeOther	12.	Have you completed a technical or trade school program (such as beautician, cosmetology, business, appliance repair, computer etc.)?
7.	How would you describe yourself? (Sexual orientation)		O Yes O No
	Straight or heterosexualBisexualGay or lesbianUnsure	13.	Which of the following best describes you? (Mark the one that fits best)
8.	 What is your primary spoken language? English Spanish Asian (Chinese, Japanese, or other) American Indian (Apache, Blackfoot, Navajo, or other) Other 		 Employed full time (35+ hours per week) Employed part time Unemployed (looking for work) Unemployed (disabled) Unemployed (volunteer work) Unemployed (retired) Unemployed (full-time student) Unemployed (full-time homemaker) Unemployed (other reason)
9.	How long have you lived in the United States?	14.	During the past 12 months, have you driven a vehicle while you were under the influence of alcohol?
	Less than a year1 to 2 years3 to 4 years5 or more yearsAll my life		YesNoDon't know or can't say
10.	What is the highest level of education you have finished, whether or not you received a degree? (Mark the highest grade you have	15.	Have you ever been in juvenile/adult detention, jail, or prison for more than 3 days?
	completed.) O 1 st grade O College freshman		○ Yes○ No
	 2nd grade 3rd grade College sophomore College junior 4th grade College completion 5th grade Some graduate school, but 	16.	If <u>YES</u> to question 15, how long has it been since you last got out of juvenile/adult detention, jail, or prison?
	 6th grade no degree received 7th grade Master's degree 8th grade Some professional school, 9th grade (such as medical or law) 		 Never in juvenile/adult detention, jail, or prison for more than 3 days
	 10th grade school) but no degree 11th grade received or doctoral program Doctorate or professional degree 		 Fewer than 30 days Between 30 days and 1 year Between 1 and 2 years Between 2 and 3 years Between 3 and 4 years Between 4 and 5 years More than 5 years

Section Two: Attitudes & Knowledge

Next, we'd like to ask you how you feel about substance use and sexual behavior, as well as what you know about HIV/AIDS. Again, your answers are private and will not be used to identify you.

The next few questions ask about HOW MUCH you think people RISK HARMING themselves physically or in other ways by using alcohol, tobacco, and drugs.

- 17. How much do people risk harming themselves physically or in other ways when they smoke one or more packs of <u>cigarettes</u> per day?
 - O No risk
 - Slight risk
 - Moderate risk
 - Great risk
 - Don't know or can't say
- 18. How much do people risk harming themselves physically or in other ways when they smoke <u>marijuana</u> once or twice a week?
 - O No risk
 - Slight risk
 - Moderate risk
 - Great risk
 - O Don't know or can't say
- 19. How much do people risk harming themselves physically or in other ways when they have five or more drinks of an alcoholic beverage once or twice a week?
 - O No risk
 - Slight risk
 - Moderate risk
 - Great risk
 - Don't know or can't say

The next questions are about your beliefs and attitudes toward **SEX**.

Some of the questions ask about having sex. By sex or sexual activity, we mean a situation where two partners get sexually excited or aroused (turned on) by touching each other's genitals (penis or vagina) or anus (butt) with their own genitals, hands, or mouth.

When a male inserts his penis into his female partner's vagina, the partners are considered to be having vaginal sex.

When one partner's mouth is in contact with the other partner's genitals (penis or vagina) or anus during sex, the partners are considered to be having *oral sex*.

When a male's penis is inserted into his male or female partner's anus, the partners are considered to be having *anal* sex.

Some questions ask about *sexual partners*. A sexual partner is someone with whom you have sex, that is, engage in sexual activity.

Some questions refer to *protected sex* and *unprotected sex*. Protected sex is when a latex or polyurethane condom (rubber) is used to cover the penis; a female condom is used to cover the vagina; or a dental dam is used to cover the anus. By unprotected sex, we mean vaginal, oral, or anal sex without a barrier such as a condom or dental dam.

How much do you think people risk harming themselves physically:

- 20. If they have oral sex without a condom or dental dam?
 - No risk
 - Slight risk
 - Moderate risk
 - Great risk

O No risk O Slight risk O Slight risk O Great risk O No risk O Slight risk O No risk O Slight risk O Moderate risk O No risk O Slight risk O Moderate risk O Somewhat O No risk O Slight risk O Moderate risk O Somewhat O No risk O Slight risk O Moderate risk O Somewhat O No risk O Slight risk O Moderate risk O Somewhat O No risk O Slight risk O Moderate risk O Somewhat O No risk O Slight risk O Moderate risk O Somewhat O No risk O Slight risk O Moderate risk O Somewhat O Very much 24. If they have sex while high on drugs? No risk O Slight risk O Moderate risk O Great risk 25. If they share nonsanitized needles or works when using drugs? ("Works" refer to supplies used for injecting drugs) O No risk O Slight risk O Moderate risk O The rest questions ask more about your attitudes and beliefs about sex. In your relationship with your PRIMARY (MAIN) partner, how confident are you that you could: 26. Refuse to have sex because your partner because your much O Not at all O Not at all O No at all O Not at all	21.	If they have vaginal sex without a condom?	28.	Tell your partner how to treat you sexually?
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A little likely Somewhat likely Somewhat likely Very likely				Not at all likely
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partner, how confident are you that you could: 26. Refuse to have sex with your partner because you weren't in the mood? 33. To use any illegal drugs (including prescription drugs) to get high? Not at all A little Somewhat Very much 34. To use injection drugs without a doctor's orders, just to feel good or to get high? Not at all likely Not at all likely Very likely 35. To use any illegal drugs (including prescription drugs) to get high? Not at all likely Not at all likely Not at all likely A little Somewhat Not at all likely A little likely Somewhat likely Somewhat likely Somewhat likely	In vo	ur relationship with your PRIMARY (MAIN)		
you weren't in the mood? Not at all A little Somewhat Very much 27. Ask your partner to wait while you got a condom or dental dam? Not at all A little Somewhat Somewhat Very likely 34. To use injection drugs without a doctor's orders, just to feel good or to get high? Not at all A little Somewhat Somewhat Somewhat Somewhat Somewhat likely Somewhat Somewhat likely Somewhat likely				
 A little Somewhat Very much A little likely Somewhat likely Very likely 27. Ask your partner to wait while you got a condom or dental dam? Not at all A little Not at all likely A little likely A little likely A little likely Somewhat Somewhat Somewhat likely Somewhat likely 	26.		33.	
 A little Somewhat Very much Ask your partner to wait while you got a condom or dental dam? Not at all A little likely Somewhat likely Very likely To use injection drugs without a doctor's orders, just to feel good or to get high? Not at all likely A little likely A little likely Somewhat Somewhat likely Somewhat likely 		O Not at all		Not at all likely
 Somewhat Very much Somewhat likely Very likely 27. Ask your partner to wait while you got a condom or dental dam? Not at all A little Somewhat Not at all likely A little likely Somewhat Somewhat likely Somewhat likely 				A little likely
27. Ask your partner to wait while you got a condom or dental dam? O Not at all O A little O Somewhat 34. To use injection drugs without a doctor's orders, just to feel good or to get high? O Not at all likely O A little likely O Somewhat				
condom or dental dam? O Not at all O A little O Somewhat O Not at all likely O Somewhat O Somewhat O Not at all likely O Somewhat O Somewhat likely		O Very much		O Very likely
A littleSomewhatA little likelySomewhat likely	27.		34.	
A littleSomewhatA little likelySomewhat likely		O Not at all		Not at all likely
 Somewhat Somewhat likely 				•
·				

35.	To use clean needles when injecting drugs?	41.	There is no cure for AIDS.
	O I do not use injected drugs		○ True
			O False
	O Not at all likely		O Don't know
			O DON'T KNOW
	O A little likely	40	V 1 1 40 141 1
	 Somewhat likely 	42.	Young people under age 18 need their
	O Very likely		parents' permission to get an HIV test.
36.	To practice safe sex?		○ True
	·		O False
	 Not intending to have sex during the next 6 		O Don't know
	months		O DOIT KNOW
	O Not at all likely	The	next questions ask about health care services.
	O Not at all likely		
	A little likely		
	 Somewhat likely 	43.	Would you know <u>where</u> to go in your
	○ Very likely		neighborhood to see a health care professional regarding HIV/AIDS or other sexually transmitted health issues?
ши	/AIDS – What You Know		sexually transmitted mealth issues:
1 11 V /	AIDS - Wilat Tou Kilow		O Yes
			O No
		44.	Would you know where to go in your
Ple	ease indicate whether you think each of the	44.	
	owing statements about HIV/AIDS is true or		neighborhood to see a health care
			professional regarding a drug or alcohol
Tais	se, or if you don't know.		problem?
			F
37.	Only people who look sick can spread the		O Yes
<i>σι</i> .			O No
	HIV/AIDS virus.		
		45.	Have you ever been tested for the HIV virus
	O True	40.	that causes AIDS?
	O False		that causes AIDS?
	O Don't know		
	o Bon (Miow		O Yes
			O No
38.	Only people who have sexual intercourse		
	with gay (homosexual) people get HIV/AIDS.	46.	If YES to Question 45, what type of HIV test
	O True		was it?
	O False		Never tested for HIV/AIDS
	O Don't know		O Never tested for hit/AIDS
39.	Birth control pills protect women from getting		Oral (Mouth) test (OraSure/OraQuick Rapid
JJ.			Saliva Test or other)
	the HIV/AIDS virus.		O Urine test
			Blood test in a clinic or doctor's office
	O True		
	O False		(Western Block or other)
	O Don't know		 More than one test conducted in a clinic or
	DOLLKIOW		doctor's office
40.	There are drugs available to treat HIV that can		O Home test kit
	lengthen the life of a person infected with the		O Don't know
	•		
	virus.		
	○ True		
	O False		
	O Don't know		

47.	If <u>YES</u> to question 45, did you receive or go back to get your results?		next few questions ask about your religious or tual beliefs and how they may affect your daily life.
	O Never tested for HIV/AIDS	52.	In general, how important are religious or
	○ Yes ○ No	V	spiritual beliefs in your day-to-day life?
	O NO		Not at all important
The	following questions ask about your relationships.		 Not too important Fairly important
			O Very important
Thin	king about all the people you know		•
48.	Are there any people you could go to when you want to talk about things having to do with your own health?	53.	When you have problems or difficulties with your school (education), work, family, friends or personal life, how often do you seek spiritual guidance and support?
	Yes, there are people I can talk withNo, there is no one I can talk with		NeverRarelySometimes
49.	Are there any people you could talk with		O Often
	about personal issues having to do with sex?		 Almost always
	Yes, there are people I can talk withNo, there is no one I can talk with	54.	How spiritual or religious would you say you are?
50.	Are there any people you could talk with about personal issues having to do with alcohol or drug use?		 Not spiritual or religious at all Not too spiritual or religious Fairly spiritual or religious Very spiritual or religious
	Yes, there are people I can talk withNo, there is no one I can talk with		

End of Section Two

Are there certain people you could go to if you need to talk about other personal matters

that you wouldn't tell just anyone?

Yes, there are people I can talk withNo, there is no one I can talk with

Section Three: Behavior & Relationships

Cigarettes, Alcohol and Drugs

The next two questions are about <u>CIGARETTES and</u> OTHER TOBACCO PRODUCTS.

Think back over the past 30 days and record on how many days, if any, you used cigarettes and/or other tobacco products.

55. During the past 30 days, on how many days did you smoke part or all of a cigarette?

(Includes menthol and regular cigarettes and loose tobacco rolled into cigarettes)

0	0 days	 12 days 	 24 days
0	1 day	O 13 days	O 25 days
0	2 days	O 14 days	O 26 days
0	3 days	O 15 days	 27 days
0	4 days	 16 days 	 28 days
0	5 days	O 17 days	 29 days
0	6 days	 18 days 	O 30 days
0	7 days	 19 days 	 Don't know
0	8 days	O 20 days	or can't say
0	9 days	 21 days 	
0	10 days	 22 days 	
0	11 days	 23 days 	

56. During the past 30 days, on how many days did you use other tobacco products?

(Includes any tobacco product other than cigarettes such as snuff, chewing tobacco, and smoking tobacco from a pipe)

0	0 days	O 12 days	O 24 days
0	1 day	 13 days 	 25 days
0	2 days	O 14 days	 26 days
0	3 days	O 15 days	 27 days
0	4 days	 16 days 	 28 days
0	5 days	 17 days 	 29 days
	6 days	 18 days 	 30 days
0	7 days	 19 days 	Don't know
0	8 days	 20 days 	or can't say
0	9 days	 21 days 	
\bigcirc	10 days	22 days	

The next two questions are about <u>ALCOHOL</u>. By alcohol, we mean BEER, WINE, WINE COOLERS, MALT BEVERAGES or HARD LIQUOR.

Different groups of people in the United States may use alcohol for religious reasons. For example, some churches serve wine during a church service. If you drink wine at church or for some other religious reason, do not count these times in your answers to the questions below.

Think back over the past 30 days and record on how many days, if any, you consumed alcohol.

57. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?

0	0 days	0	12 days	0	24 days
0	1 day		13 days	0	25 days
0	2 days	0	14 days	0	26 days
0	3 days	0	15 days	0	27 days
0	4 days	0	16 days	0	28 days
0	5 days	0	17 days	0	29 days
0	6 days	0	18 days	0	30 days
0	7 days	0	19 days	0	Don't know
0	8 days	0	20 days		or can't say
0	9 days	0	21 days		
0	10 days	0	22 days		
0	11 days	0	23 days		

58. During the past 30 days, on how many days have you been <u>drunk or very high</u> from drinking alcoholic beverages?

0 days	 12 days 	 24 days
O 1 day	13 days	O 25 days
2 days	 14 days 	 26 days
3 days	 15 days 	 27 days
4 days	 16 days 	 28 days
5 days	 17 days 	 29 days
6 days	18 days	 30 days
O 7 days	O 19 days	Don't know
8 days	O 20 days	or can't say
9 days	 21 days 	
 10 davs 	 22 davs 	

○ 11 days ○ 23 days

○ 11 davs ○ 23 davs

The next question is about MARIJUANA or HASHISH. Marijuana is sometimes called weed, blunt, hydro, grass, or pot. Hashish is sometimes called hash or hash oil.

Think back over the past 30 days and record on how many days, if any, you used marijuana or hashish.

59. During the past 30 days, on how many days did you use <u>marijuana or hashish</u>?

0	0 days	0	12 days	0	24 days
0	1 day	0	13 days	0	25 days
0	2 days	0	14 days	0	26 days
0	3 days	0	15 days	0	27 days
0	4 days		16 days		28 days
0	5 days	0	17 days	0	29 days
0	6 days	0	18 days	0	30 days
0	7 days	0	19 days	0	Don't know
0	8 days	0	20 days		or can't say
0	9 days	0	21 days		
0	10 days	0	22 days		
\bigcirc	11 dave	\bigcirc	33 days		

The next question is about <u>OTHER ILLEGAL DRUGS</u>, **excluding** marijuana or hashish.

These include substances like inhalants or sniffed substances such as glue, gasoline, paint thinner, cleaning fluid, or shoe polish (used to feel good or get high), heroin, crack, or cocaine, methamphetamine, hallucinogens (drugs that cause people to see or experience things that are not real) such as LSD (sometimes called acid), Ecstasy (MDMA), PCP, peyote (sometimes called angel dust), and prescription drugs used without a doctor's orders, just to feel good or to get high.

Think back over the past 30 days and record on how many days, if any, you used other illegal drugs.

60. During the past 30 days, on how many days did you use any other <u>illegal drug</u>?

0	0 days	12 days	24 days
0	1 day	13 days	O 25 days
0	2 days	O 14 days	O 26 days
0	3 days	O 15 days	 27 days
0	4 days	O 16 days	 28 days
0	5 days	 17 days 	 29 days
0	6 days	 18 days 	O 30 days
0	7 days	 19 days 	Don't know
0	8 days	 20 days 	or can't say
0	9 days	 21 days 	_
0	10 days	 22 days 	
0	11 days	 23 days 	

Now we would like to ask about your use of several specific drugs during the past 30 days.

61.	During the past 30 days, on how many days
	did you use <u>cocaine or crack</u> ?

0 days	 12 days 	 24 days
O 1 day	 13 days 	 25 days
O 2 days	 14 days 	O 26 days
3 days	 15 days 	 27 days
O 4 days	 16 days 	 28 days
5 days	 17 days 	 29 days
O 6 days	 18 days 	O 30 days
O 7 days	 19 days 	 Don't know
8 days	 20 days 	or can't say
9 days	 21 days 	
O 10 days	 22 days 	
O 11 days	 23 days 	

62. During the past 30 days, on how many days did you use <u>methamphetamine</u>? (Also called meth, crystal meth, crank, go, and speed)

0	0 days	0	12 days	0	24 days
0	1 day	0	13 days	0	25 days
0	2 days	0	14 days	0	26 days
0	3 days	0	15 days	0	27 days
0	4 days	0	16 days	0	28 days
0	5 days	0	17 days	0	29 days
0	6 days	0	18 days	0	30 days
0	7 days	0	19 days	0	Don't know
0	8 days	0	20 days		or can't say
0	9 days	0	21 days		
0	10 days	0	22 days		
0	11 days	0	23 days		

63. During the past 30 days, on how many days have you used <u>prescription drugs without a doctor's orders</u>, in order to feel good or to get high?

0 days	 12 days 	 24 days
O 1 day	 13 days 	 25 days
O 2 days	O 14 days	O 26 days
3 days	 15 days 	 27 days
4 days	 16 days 	 28 days
5 days	 17 days 	 29 days
6 days	 18 days 	 30 days
7 days	 19 days 	Don't know
8 days	 20 days 	or can't say
9 days	 21 days 	
 10 davs 	 22 davs 	

○ 11 days ○ 23 days

64.	have you <u>in</u> j	ected any dru	on how many days ugs? (Count only		next few questions ask about d a substance.	the FIRST TIME you
	injections without a doctor's orders you used to					
	feel good or t	to get high.)			k back whether you have EVI	
					stances. If so, what was your a	
	O 0 days	12 days	O 24 days	you	used the following substances	S.
	O 1 day	 13 days 	 25 days 			
	O 2 days	O 14 days	O 26 days	67.	How old were you the firs	t time you smoked
	O 3 days	O 15 days	O 27 days		part or all of a cigarette?	(Includes menthol and
	O 4 days	16 days	O 28 days		regular cigarettes and loose	tobacco rolled into
	O 5 days	17 days	O 29 days		cigarettes)	
	O 6 days	0 18 days	O 30 days			
	O 7 days	0 19 days	O Don't know		 I have never smoked pa 	rt or all of a
	O 8 days	O 20 days	or can't say		cigarette	
	9 days	O 21 days				
	0 10 days	O 22 days			5 years old or younger	20 years old
	O 11 days	O 23 days			6 years old	21 years old
CE	Duning the ne		avv atvacatvil bava		7 years old	22 years old
			ow <u>stressful</u> have		8 years old	23 years old
			se of your use of		9 years old	24 years old
	alcohol or dr	ugs?			10 years old	25 years old
	O I have not	used alcohol (or drugs in the past 30		11 years old	26 years old
	days	useu alconor	or drugs in the past 50		O 12 years old	O 27 years old
	uays				O 13 years old	O 28 years old
	O Not at all				O 14 years old	O 29 years old
	Somewha	.+			O 15 years old	O 30 years old
	Considera				O 16 years old	Over 30
	Extremely				O 17 years old	years old
	LAtternery				O 18 years old	O Don't know
66.	During the p	ast 30 davs. h	nas your use of		O 19 years old	or can't say
	alcohol or drugs caused you to have		68. How old were you the first time you used			
	emotional p		,	68.		
	<u>omononai p</u>				other tobacco product? (I	
	O I have not	used alcohol o	or drugs in the past 30		product other than cigarette	
	days	4004 4,001,01	or arage in the past so		chewing tobacco, and smok	ding lobacco from a
	, c				pipe)	
	Not at all				O I have never used any of	ther tohacco products
	Somewha	ıt			o Thave hever asea any or	inci tobacco products
	Considera				5 years old or younger	O 20 years old
	 Extremely 	, -			6 years old or yeariger6 years old	O 21 years old
	_				O 7 years old	O 22 years old
					8 years old	O 23 years old
					9 years old	O 24 years old
					10 years old	25 years old
					O 11 years old	26 years old
					O 12 years old	O 27 years old
					O 13 years old	28 years old
					O 14 years old	O 29 years old
					O 15 years old	30 years old
					16 years old	Over 30
					O 17 years old	years old
					18 years old	Don't know
					O 19 years old	or can't say
					•	•

69.	How old were you the first drink of an alcoholic beve beer, wine, wine coolers, many many many many many many many many	rage? (Includes	71.	How old were you the firs other illegal drug?	t time you used any
	liquor) DO NOT include any time when you only had a sip or two from a drink.			O I have never used any o	ther illegal drugs
	I have never had a drink beverage			5 years old or younger6 years old7 years old	20 years old21 years old22 years old23 years old
	O 5 years old or younger	O 20 years old		8 years old9 years old	23 years old24 years old
	5 years old or younger6 years old	20 years old21 years old		10 years old	24 years old25 years old
	O 7 years old	21 years old22 years old		11 years old	26 years old
	8 years old	22 years old23 years old		12 years old	27 years old
	9 years old	23 years old24 years old		13 years old	27 years old28 years old
	10 years old	24 years old25 years old		14 years old	29 years old
	10 years old11 years old	25 years old26 years old		15 years old	30 years old
	12 years old	20 years old27 years old		16 years old16 years old	Over 30
	12 years old 13 years old	27 years old28 years old		17 years old	years old
	13 years old14 years old	20 years old29 years old		18 years old	Don't know
	14 years old15 years old	30 years old		19 years old	or can't say
	15 years old16 years old	O Over 30		o 10 years old	or carresay
	17 years old 17 years old	years old			
	18 years old	O Don't know	•		
	19 years old	or can't say	Sex	ual Behavior	
70.	 How old were you the first marijuana or hashish? (All pot, hash, or hash oil) I have never used mariju 5 years old or younger 	so known as grass,	sex.	we'd like to ask you about you go to	t we mean by sex, page 4. Remember,
	 6 years old 7 years old 8 years old 9 years old 10 years old 11 years old 	21 years old22 years old23 years old24 years old25 years old26 years old	73.	anal)? O Yes O No Have you had oral sex in a	
	12 years old13 years old14 years old15 years old	27 years old28 years old29 years old30 years old		O Yes O No	
	16 years old17 years old18 years old	Over 30 years oldDon't know	74.	The last time you had ora protected or unprotected	
	O 19 years old	or can't say		O I have never had oral se	х
				ProtectedUnprotected	
			75.	Have you had <u>vaginal</u> sex days?	in the past 30
				O Yes O No	

76.	The last time you had vaginal sex, was it protected or unprotected?	85.	During the <u>past 3 months</u> , how many sexual partners have you had?
77.	 I have never had vaginal sex Protected Unprotected Have you had <u>anal</u> sex in the past 30 days?		 None 1 person 2 people 3 people 4 people 5 people 6 people 7 people 8 people 9 people 10 people or more 5 people
78.	YesNoThe last time you had anal sex, was it	86.	Have you <u>ever</u> had unprotected sex (vaginal, anal, or oral) with someone in exchange for money, drugs, or shelter?
	protected or unprotected?		○ Yes ○ No
	I have never had anal sexProtectedUnprotected	87.	In the <u>past 3 months</u> , have you had unprotected sex (vaginal, anal, or oral) with someone in exchange for money, drugs, or shelter?
your	next set of questions asks more specifically about sexual behavior. Some questions refer to the past enths and others to your experience ever.		O Yes O No
3 mo 79.	In the past 3 months, have you had sex with any men?	l 88.	Have you <u>ever</u> had unprotected sex (vaginal, anal, or oral) with a partner you know had, or suspected of having a sexually transmitted disease (STD)?
	O Yes O No		○ Yes ○ No
80.	Are you a woman who has sex with men? O Yes O No	89.	In the <u>past 3 months</u> , have you had unprotected sex (vaginal, anal, or oral) with a partner you know had, or suspected of having a sexually transmitted disease (STD)?
81.	Are you a man who has sex with men? O Yes		O Yes O No
82.	No In the <u>past 3 months</u> , have you had sex with any women?	90.	Have you <u>ever</u> had unprotected sex (vaginal, anal, or oral) with a partner you know had, or suspected of having HIV/AIDS?
	○ Yes○ No		○ Yes ○ No
83.	Are you a man who has sex with women?		
84.	YesNo Are you a woman who has sex with women?	91.	In the <u>past 3 months</u> , have you had unprotected sex (vaginal, anal, or oral) with a partner you know had, or suspected of having HIV/AIDS?
	O Yes O No		O Yes O No

92.	Have you <u>ever</u> had unprotected sex (vaginal, anal, or oral) with someone whom you knew was, or suspected of being an injected drug user?	98.	Sexually abused you (forced you to have sex physically hurt the sexual parts of your body)? O Never
	O Yes O No		O Rarely O Sometimes O Often
93.	In the <u>past 3 months</u> , have you had unprotected sex (vaginal, anal, or oral) with someone whom you knew was, or suspected of being an injected drug user?	99.	Very oftenForced you to use drugs or alcohol?Never
94.	 Yes No Have you ever had sex while you were under the influence of drugs or alcohol?		RarelySometimesOftenVery often
	O Yes O No	Fam	ily, Relationships and Work
95.	In the <u>past 3 months</u> , have you had sex while you were under the influence of drugs or alcohol?	100.	Describe your current relationship status.
	O Yes O No		 Single (never married) Informally married or living with a permanent partner Legally married
	next few questions ask about abuse you might experienced.		SeparatedDivorced or broken up from an informal marriage
	e <u>past 3 months</u> , how often has anyone with m you had an intimate relation, sexual or not…	101.	• Widowed With whom do you live?
96.	Emotionally abused you (swore at you, called you negative names, kept you from seeing family or friends)? O Never O Rarely O Sometimes O Often Very often		 (Mark all that apply) Alone With my mother With my father With my brother(s) and/or sister(s) With my grandparent(s) With other relatives or guardian With my spouse or significant other With my child or my children
97.	Physically abused you (slapped, beat, kicked, or choked you; threatened you with a knife or a gun)?	102.	With roommatesOtherDescribe where you live.
	NeverRarelySometimesOftenVery often		 In my own home or apartment In a relative's home In a group home In a foster home Homeless or in a shelter Other

103.	At what age did you have your first child? O No children O 9 to 13 years old O 14 to 18 years old O 19 to 25 years old O 26 to 34 years old O 35 years old or older	108.	Would you be more or less likely to want to work for an employer that tests its employees for drug or alcohol use on a random basis? Would you say more likely, less likely, or would it make no difference to you? (Mark one) O More likely
104.	How many children <u>under</u> the age of 18 are living with you?		Less likelyWould make no differenceDon't know or can't say
	 0 1 to 2 3 to 4 5 to 6 More than 6 	rela	e next set of questions asks about your family's ationships. I'm available when others in my family want
105.	If you have children, during the past 12 months, how many times have you talked with your children about the dangers or problems associated with the use of tobacco, alcohol, or drugs?		to talk to me. I don't have any family Not true Sometimes true Usually true
	 I don't have any children 0 times 1 to 2 times A few times Many times Don't know or can't say 	110.	 Always true I listen to what other family members have to say, even when I disagree. I don't have any family
106.	Think about the household members that live with you right now. About how much income have you and/or your family members made in the last year before taxes? (Include child		Not trueSometimes trueUsually trueAlways true
	support and/or cash payments from the government, for example, welfare [TANF], SSI, or unemployment compensation)	111.	Members of my family ask each other for help.
	\$0-\$10,000 \$10,001-\$20,000 \$20,001-\$30,000 \$30,001-\$40,000 \$40,001-\$50,000 \$50,001-\$60,000 More than \$60,000	112.	 I don't have any family Not true Sometimes true Usually true Always true Members of my family like to spend free time with each other.
107.	Do you have health care or medical insurance? O Yes O No		 I don't have any family Not true Sometimes true Usually true Always true

113.	Members of my family feel very close to each other.
	O I don't have any family
	Not trueSometimes trueUsually trueAlways true
114.	We can easily think of things to do together as a family.
	O I don't have any family
	Not trueSometimes trueUsually trueAlways true
	e next two questions ask about programs or sses you may have attended recently.
115.	In the <u>past 30 days</u> , have you been in any classes or programs where they talked about prevention of drug or alcohol abuse?
	○ Yes○ No
116.	In the <u>past 30 days</u> , have you been in any classes or programs where they talked about preventing HIV/AIDS?
	○ Yes ○ No
	e last two questions ask about your experience n this survey.
117.	How comfortable was it for you to answer the questions in this survey?
	Very comfortableSomewhat comfortableSomewhat uncomfortableVery uncomfortable
118.	How truthful were you when answering the questions?
	Very truthfulSomewhat truthfulSomewhat untruthful

YOU ARE DONE! Thank you for your help!

Very untruthful